



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 8345

SERIAL NUMBER 10/825,472	FILING OR 371(c) DATE 04/15/2004 RULE	CLASS 514	GROUP ART UNIT 1654	ATTORNEY DOCKET NO. 98204.00024
------------------------------------	-----------------------------------------------------------	---------------------	-------------------------------	-------------------------------------------

APPLICANTS
 Robert H. Zimmer, Mulhouse, FRANCE;

**** CONTINUING DATA *******
 This application is a CON of 09/844,426 08/07/2000 ABN and is a CON of 10/050,903 01/16/2002 PAT 6,908,900
 and is a CON of 10/237,254 09/06/2002 ABN OK
RT

**** FOREIGN APPLICATIONS *******

IF REQUIRED, FOREIGN FILING LICENSE GRANTED SMALL ENTITY ****
 ** 06/17/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <u>RT</u> Initials	STATE OR COUNTRY FRANCE	SHEETS DRAWING 0	TOTAL CLAIMS 24	INDEPENDENT CLAIMS 3
------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------	----------------------------	---------------------------	--------------------------------

ADDRESS
 McCARTER & ENGLISH, LLP
 Attn: Anita Lomartra
 CityPlace 1
 185 Asylum Street
 Hartford, CT06103

TITLE
 Compositions and methods for enhanced pharmacological activity of compositions comprising peptide drug substances

FILING FEE RECEIVED 546	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
-----------------------------------	-------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------